

87/G/2, R.N. Tagore Road, Berhampore Murshidabad- 742101 WEST BENGAL,7277370071 / 9832514328

BILL / MONEY RECEIPT

Bill No.:1

Date:02/03/2026

Name.:SUJAN CHUNARI

Time:01:39:37

Add/Ph.:

Age/Gender:27 Yr / MALE

Referred by.:DR.A.I.I.M.S KALYANI

Sub Associate:

Associate:B.SK

Test Parameter	Rate
Complete Haemogram	350.00
Renal Function Test (RFT)	2150.00
T3, T4 & TSH	690.00
Glucose Fasting	80.00
Lipid Profile	750.00
Collection Charge	0.00
Total Value	4020.00

Authorised Signatory